FIGURE 1 APPLICATION FOR MoDOT TECHNICIAN CERTIFICATION PROGRAM

(Copy form for each applicant as needed)

Applicant's name: userID:

These courses are limited to a minimum and maximum enrollment. Registration is based on course availability, so it is recommended you apply as early as possible for these courses. The Materials Qualification Engineer reserves the right to reschedule or cancel under-enrolled courses. MoDOT reserves the right to deny application if applicant has no intent to perform acceptance testing for MoDOT projects.

To Enroll: Please complete this form electronically or print and neatly print or type the required information. Return the completed form to the Materials Qualification Engineer by the following means. Mail hard copy to Randy S. Morris, P.O. Box 270, Jefferson City, MO 65102, phone 573-522-2742 or fax hard copy to 573-526-0857. This electronic form once completed can be E-mailed to morrir3@mail.modot.state.mo.us

Entry boxes with a double lined bottom are required fields. If information is not provided in these boxes the application will not be accepted until information is provided. The tab key will move to next field.

| Course(New or Re-Certification) | First Choice Course Date | Second Choice Course Date | Third Choice Course Date |
|---|-----------------------------|------------------------------|-----------------------------|
| Level 1 Technician | | | |
| Level 2 Aggregate* | | | |
| Level 2 Soils* | | | |
| Level 2 Concrete* | | | |
| Level 2 Bituminous** | | | |
| Low Slump*** | | | |
| Profilograph | | | |
| Aggregate Specific Gravity* | | | |
| * Level 1 Technician is a required Pre-requisite ** Offered through the University of Missouri - Rolla. Level 1 Technician is a required Pre-requisite. *** Level 2 Concrete is a required Pre-requisite. | | | |
| Employer Name | | | |
| Supervisor's Name | | | |
| Work Address | | | |
| Work City | State | Zip Co | ode |
| Work Phone | Work Fax | | |
| Who should be billed for this training? Man | rk next to choice | Applicant | Employer |

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APPLICATION FOR MoDOT TECHNICIAN CERTIFICATION PROGRAM, CONTINUED

| Title; Mr., Mrs., Ms.: Lineage; Jr., Sr., II, etc.: | | | |
|--|--|--|--|
| Last Name Telephone | | | |
| First Name Fax | | | |
| Middle Name E-mail | | | |
| Social Security Number | | | |
| Home Address | | | |
| Home City State Zip Code | | | |
| Current MoDOT Certification Number | | | |
| Current Other Certification Number and Source | | | |
| Please read the following statement. You will be required to sign a copy of this when you attend a course | | | |
| This document affirms that,hereinafter the Technician, desires to be certified by the MoDOT Technician Certification Program. | | | |
| Certification carries inherent rights and responsibilities. These rights include being exclusively sanctioned along with others so qualified by the MoDOT Technician Certification Program to perform sampling, testing, and reporting of test results for quality control and quality assurance programs. These responsibilities include performing and reporting tests with the accuracy and precision expected of the Technician in accordance with the required test procedures. By signing this document the Technician agrees to abide by all of the terms specified in the Administration Section and as set forth by the contracting Agency. An individual will be considered as decertified if he/she fails to renew their certification after three years or | | | |
| fails the re-certification testing. In addition, de-certification will be considered by the Training Review Board for fraud, abuse, willful negligence or demonstrated incompetence as identified by the Technician's supervisor or a certified technician, verified by a second certified technician and recommended by the District Coordinator. Charges must be presented in writing by the District to the Review Board. If validated by the Review Board the minimum action will be for the first offense a written reprimand to the individual from the Review Board. The second violation will result in a thirty-day suspension of all certifications the individual currently holds. A third offense will result in permanent withdrawal of all certifications. A recommendation will be made by the Review Board to the District and Human Resources Division regarding removal from inspection responsibilities and assignment to other work for MoDOT employee's. If the department determines other productive work is not available, the MoDOT employee will be suspended without pay. After the de-certification proceeding, the Training Coordinator will notify the individual and their supervisor of the outcome in writing within five working days of the decision to de-certify. | | | |
| Individuals may appeal decisions involving the Technician Certification Program. Such appeals must be made in writing to the Training Review Board through the Materials Qualification Engineer. A written response will be made as soon as possible. | | | |
| I,, have read, understand, and agree to abide by the rights, responsibilities, and penalties associated with reciept of this certification. | | | |
| Signature Date | | | |
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